

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

KEEP OUR MISSION PAC

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00307405

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lisa Lisker

Signature of Treasurer

Electronically Filed by Lisa Lisker

Date

10

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
KEEP OUR MISSION PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		504771.82
(b) Cash on Hand at Beginning of Reporting Period	465933.60	
(c) Total Receipts (from Line 19)	244.94	1001.34
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	466178.54	505773.16
7. Total Disbursements (from Line 31)	8895.50	48490.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	457283.04	457283.04
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
KEEP OUR MISSION PAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 9 3 0 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	227.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	244.94	773.74
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	244.94	1001.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	244.94	1001.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5295.50	8090.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	5295.50	8090.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2600.00	37400.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1000.00	3000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8895.50	48490.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8895.50	48490.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5295.50	8090.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	227.60
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5295.50	7862.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 9

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

KEEP OUR MISSION PAC

A.

Full Name (Last, First, Middle Initial)

Yorkville National Bank

Mailing Address 102 E Van Emmon Street

City

Yorkville

State

IL

Zip Code

60560

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

773.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: SA17.4348

Amount of Each Receipt this Period

244.94

Interest Income

SUBTOTAL of Receipts This Page (optional)

244.94

TOTAL This Period (last page this line number only)

244.94

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KEEP OUR MISSION PAC

A. Full Name (Last, First, Middle Initial) Burham Strategies	Transaction ID: SB21B.4361 Date of Disbursement
Mailing Address PO Box 488	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Batavia IL 60501	Amount of Each Disbursement this Period
Purpose of Disbursement Media Consulting Candidate Name	<div> <div>4000.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Huckaby-Davis-Lisker	Transaction ID: SB21B.4359 Date of Disbursement
Mailing Address 228 S. Washington St. Suite 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Alexandria VA 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Accounting/Compliance Services Candidate Name	<div> <div>1264.50</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Yorkville National Bank	Transaction ID: SB21B.4349 Date of Disbursement
Mailing Address 102 E Van Emmon Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City State Zip Code Yorkville IL 60560	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Fee Candidate Name	<div> <div>31.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5295.50

TOTAL This Period (last page this line number only)

5295.50

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KEEP OUR MISSION PAC

A. Full Name (Last, First, Middle Initial)
ILLINOIS REPUBLICAN PARTY

Mailing Address P.O. Box 64897

City Chicago State IL Zip Code 60664

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4357

Date of Disbursement

08 / 18 / 2008

Amount of Each Disbursement this Period

600.00

B. Full Name (Last, First, Middle Initial)
PAT ROBERTS FOR U S SENATE INC

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: KS District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4350

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

2600.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KEEP OUR MISSION PAC

A.

Full Name (Last, First, Middle Initial)
Citizens to Elect Tom Cross

Mailing Address 24047 W. Lockport S., Ste. 201

City Plainfield State IL Zip Code 60544

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.4354

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

TOTAL This Period (last page this line number only) ►

1000.00